

Return completed form to:

**L.A. COUNTY DEPARTMENT OF PUBLIC WORKS
WATERWORKS DISTRICTS**

P.O. BOX 1460

ALHAMBRA, CA 91802-1460

Phone: 626-300-3394

Fax: 626-300-3385

**Backflow Prevention Assembly
Field Test and Maintenance Report**

Account #: _____ Manufacturer Model _____ Type _____ Size _____
Test Due: _____ Device: _____
Service Address Serial #: _____
Address: _____
City: _____ Meter #: _____
Zip: _____ Size: _____
Company: _____ Telephone: _____
Location: _____

	Reduced Pressure Principle Assembly			RP <input type="checkbox"/> DCDA <input type="checkbox"/> DC <input type="checkbox"/> RPDA <input type="checkbox"/> PVB <input type="checkbox"/> Air Gap <input type="checkbox"/> SVB <input type="checkbox"/> AVB <input type="checkbox"/>
	Double Check Valve Assembly			
	Check Valve #1	Check Valve #2	Relief Valve	PVB/SVB
Initial Test	Leaked <input type="checkbox"/> Held at _____ PSID	Leaked <input type="checkbox"/> Closed Tight <input type="checkbox"/> Held at _____ PSID	Did not Open <input type="checkbox"/> Opened at _____ PSID	AIR INLET Did not Open <input type="checkbox"/> Opened at _____ PSID
Repairs	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/>	CHECK VALVE Leaked <input type="checkbox"/> Held at _____ PSID
Details				Cleaned <input type="checkbox"/> Replaced <input type="checkbox"/> AIR INLET Opened at _____ PSID
Final Test	Held at _____ PSID	Closed Tight <input type="checkbox"/> Held at _____ PSID	Opened at _____ PSID	CHECK VALVE Held at _____ PSID

Comments

_____	Line Pressure _____
_____	Meter Reading _____
_____	Held Backpressure _____
_____	#2 Shutoff _____
_____	Relief Valve Exercised _____

The above report is certified to be true.

	Certified Tester #	Print Name	Tester Signature	Phone #	Date	Passed	Failed
Initial Test						<input type="checkbox"/>	<input type="checkbox"/>
Repairs						<input type="checkbox"/>	<input type="checkbox"/>
Final Test						<input type="checkbox"/>	<input type="checkbox"/>